PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/506702

CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	THAN
			(Column	1)	(Column 2)		TYPE [OF	SMALL	ENTITY
TOTAL CLAIMS								RATE	FEE]	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	720
TO	OTAL CHARGE	ABLE CLAIMS	<i>≥</i> 0 mii	nus 20 =	*			XS 9=		OR	XS18=	
INDEPENDENT CLAIMS			S m	inus 3 =	· 2			X43=		OR	X86=	B 02
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	-290=	
* 11	the difference	e in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II										1	OTHER	THAN
		(Column 1)	(Column 2			(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	XS18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MI	JLTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
							l	TOTAL			TOTAL	
									L	Un	ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	_	=		X\$ 9=		OR	X\$18=	
	Incependent	*	Minus	***		=		X43=		OR-	X86=	
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										.000	
						•	Ŀ	+145=	·	OR	+290= TOTAL	
					•	•	A	TOTAL DDIT. FEE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	-	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	┢	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									∪ ⊓		
+145										OR	+290=	·
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ;	TOTAL ADDIT. FEE	
		mber Previously Pa ber Previously Paid							ropriate box			
•												